02-19-02

PTO/SB/05 (03-01)

Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY
PATENT APPLICATION

TRANSMITTAL

Attorney Docket No. REG 780D

First Inventor Andrew J. Murphy

Methods of Modifying Eukaryotic Cells

(Only for new nonprovision	al applications under 37 CFR 1.53(b))	Express	Mail Label No.	ET71252170	5US	7,7	
	FION ELEMENTS	1	ADDRESS TO: Assistant Commissioner for Paterits Box Patent Application				
See MPEP chapter 600 conce  1. X Fee Transmittal For (Submit an original and a concentration of See 37 CFR 1.27.  3. X Specification (preferred arrangement - Descriptive title - Cross Reference - State ment Regal - Reference to se or a computer por - Background of to - Brief Summary - Brief Description - Detailed Description - Detailed Description - Claim(s) - Abstract of the - Abstract of the - Description - Description - Detailed Description - Detailed Description - Claim(s) - Abstract of the - Drawing(s) (35 Umbed of the - Description - Description - Description - Description - Detailed Description -	7. [ 8 Nucl (ff a) a. [ b. S c. [ A 9. [ 10. [ 11. [ 12. [ 13. [	Washington, DC 20231  7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8 Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee)  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
Signed standard in the first factor of the f	16. <b>[</b>	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional X Continuation-in-part (CIP) of prior application No.: 09 / 784,859  Prior application information: Examiner T.N.Ton Group Art Unit. 1632  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
19. CORRESPONDENCE ADDRESS							
Customer Number or Bar Code Label (Insert Customer No. of Attach bar code label here)  (Insert Customer No. of Attach bar code label here)							
Name	Linda O. Palladino						
	Regeneron Pharmaceuticals, Inc.						
Address 777 Old Saw Mill River Road							
City Tarrytown			New York	Zip C	Zip Code 10591		
Country	Telephone	914-345-7400	Fa	ax	914-345-7721		
Name (Print/Type)	Linda O. Palladino	<del></del>	istration No. (Atto	rney/Agent)	45,	636	
Signature Mila D. Palla Sin			Date February 15, 200			uary 15, 2002	

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PTO/SB/17 (10-01)

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## **FEE TRANSMITTAL** for FY 2002

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

(\$)	3,762

Complete if Known			
Application Number	Not Yet Known		
Filing Date	Filed Herewith		
First Named Inventor	Andrew J. Murphy		
Examiner Name	Not Yet Known		
Group Art Unit	Not Yet Known		
Attorney Docket No.	REG 780D		

The Commissioner is hereby authorized to charge included fees and credit any overpayments to:   Deposit   18-0650     18-0650	METHOD OF PAYMENT	FEE CALCULATION (continued)					
Large Entity   Small Entity   Fee Paid		3. ADDITIONAL FEES					
Regeneron Pharmaceuticals, Inc.   The Paid Account Name   Regeneron Pharmaceuticals, Inc.   The Paid Name   Regeneron Pharmaceuticals, Inc.   The Paid Name	Deposit	<del>-</del>					
Code   (s)   Code   (s)   Code   (s)	Account 18~0650		aid				
Charge Any Additional Fee Required   127   50   227   25   Surcharge - late lining fee or oath   127   130	Demosit	Code (\$) Code (\$)	$\overline{}$				
127   50   227   25   25   25   25   25   25   2	Account Regeneron Pharmaceuticals, Inc.		$\dashv$				
Applicant claims small entity status   139   130   1	Charge Any Additional Fee Required		$\dashv$				
Payment Enclosed:		139 130 139 130 Non-English specification					
Check		147 2.520 147 2,520 For filing a request for ex parte reexamination	_				
Total Claims	Check C Credit card Money Other	Examiner action	_				
1. BASIC FILING FEE   Large Entity Small Entity   Fee Fee Fee Fee Fee Fee Fee Fee Fee F			$\dashv$				
Large Entity Small Entity   Fee			$\dashv$				
Total Claims	Large Entity Small Entity						
118   1,440   218   720   Extension for reply within fourth month   128   1,960   228   980   Extension for reply within firth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   228   980   Extension for reply within fifth month   128   1,960   226   980   Extension for reply within fifth month   128   1,960   226   980   Extension for reply within fifth month   128   1,960   226   980   Extension for reply within fifth month   128   1,960   226   980   Extension for reply within fifth month   128   1,960   226   160   Filling a price in support of an appeal   120   320   221   140   140   240   55   Petition to revive - unavoidable   141   1,280   241   640   Petition to revive - unavoidable   142   1,280   242   640   Utility issue fee (or reissue)   143   460   243   230   Design issue fee   144   1,280   244   640   Petition to revive - unintentional   142   1,280   242   640   Utility issue fee (or reissue)   144   620   244   310   Petition to revive - unintentional   142   1,280   242   130   122   130   122   130   122   130   122   130   122	Fee Fee Fee Fee Description		$\dashv$				
106 330	0000 (V) 0000 (V)	118 1,440 218 720 Extension for reply within fourth month	$\dashv$				
107 510 207 255 Plant filing fee  108 740 208 370 Reissue filing fee  114 160 214 80 Provisional filing fee  SUBTOTAL (1) (\$) 740.  2. EXTRA CLAIM FEES  Total Claims 107 -20** = 87 x 14 x 84 = 1,566, Independent 177 - 3*** = 14 x 84 = 1,176. Multiple Dependent  Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	740.	128 1,960 228 980 Extension for reply within fifth month					
114 160 214 80 Provisional filing fee  SUBTOTAL (1) (\$) 740.  2. EXTRA CLAIM FEES  Extra Claims  107 -20** = 87 x 18. = 1,176. Independent Claims Multiple Dependent  Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Code (\$) Code		119 320 219 160 Notice of Appeal					
SUBTOTAL (1) (\$) 740.  2. EXTRA CLAIM FEES  Extra Claims 107 -20** = 87 × 18. = 1,566. Independent 17 - 3** = 14 × 84. = 1,176. Claims Multiple Dependent  Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	108 740 208 370 Reissue filing fee						
SUBTOTAL (1) (\$) 740.  2. EXTRA CLAIM FEES  Extra Claims  Extra Claims  Fee from below  Fee Paid Independent  Claims  Multiple Dependent  Large Entity Small Entity  Fee Fee Fee Fee Fee Fee Fee Fee Fee Code (\$) Code (\$)  102 84 202 42 Independent claims in excess of 3  104 280 204 140 Multiple dependent claims over original patent  109 84 209 42  **Reissue Independent claims in excess of 20  110 18 210 9  **Reissue claims in excess of 20  110 18 210 9  **Reissue claims in excess of 20  110 18 210 9  **Reissue claims in excess of 20  1110 18 210 9  **Reissue claims in excess of 20  1120 179 740 279 370 Request for Continued Examination (RCE)	114 160 214 80 Provisional filing fee						
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Extra Claims   107   -20** = 87   X   18.   = 1,566.     Independent Claims   17   -3** = 14   X   84.   = 1,176.     Multiple Dependent   280.   = 280.   = 280.     Large Entity Small Entity   Fee Fee Fee Fee Fee Fee Fee Fee Fee F			-				
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Independent 17 - 3** = 14 X 84 - 1,176.  Multiple Dependent 280 - 280 - 280 - 122 130 Petitions to the Commissioner  Large Entity Small Entity Fee	Extra Claims below Fee Paid	, 12 1,250					
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and over original natent	110 18 210 9 ** Reissue claims in excess of 20 and over original patent	,					
and over original patent 169 900 169 900 Request for expedited examination of a cesign application	and over onginal patent	169 900 169 900 Request for expedited examination of a design application					
SUBTOTAL (2) (\$) 3,022. Other fee (specify)	SUBTOTAL (2) (\$) 3,022.	Other fee (specify)					
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)					

SUBMITTED BY Complete (Ifap)				fapplicable)		
Name (Print/Type)	Linda Q. Palladino	1	Registration No. (Attorney/Agent)	45,636	Telephone	914-345-7400
Signature	Tudao.	Tall	adend		Date	February 15, 2002

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